

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SE		6-19-01
O.I.P.E. CLASSIFIER		10	6-29-01
FORMALITY REVIEW	MP	574	8/10/01
RESPONSE FORMALITY REVIEW	JK	835	10/22/01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	2/19/01
2	2/19/01
3	2/19/01
4	2/19/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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8-10-01  
 REF-5058  
 10/23/01